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	son, Marriottsville, MD; Sermantown, MD;				- · · · · · · · · · · · · · · · · · · ·			
This application which is a CIP of	A ************************************	3/20737 ⁻ 97 ****						
Foreign Priority claimed yes no 35 USC 119 (a-d) conditions yes no Met after met Allowance Verified and Acknowledged Examiner's Signature Initials			STATE OR COUNTRY MD	SHEETS TOT DRAWING CLA 11 6		MS	INDEPENDENT CLAIMS 6	
ADDRESS 27144								
TITLE CHLAMYDIA PROTEI	N, GENE SEQUENCE	AND US	ES THEREOF	=				
	EES: Authority has been given in Paper lo to charge/credit DEPOSIT ACCOUNT lo for following:				☐ All Fees			
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FILING FEE FEES					☐ 1.17 Fees (Processing Ext. of time)			
2160 No					☐ 1.18 Fees (Issue)			
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